POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).							
I hereby appoint:							
Practitioners associated with the Customer Number:				26386			
or							
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):							
	Name		Registration	Registration Nam Number		Registration Number	
-			MILIDE	***************************************		Manne	
0330000	annound announce and			***************************************	***************************************	***************************************	
				***************************************	***************************************		
-	NAME OF THE PROPERTY OF THE PR	minutes securitarios contractorios contracto			xXxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		
	ondicanonina and an analysis of the	na na manana na mana			*******************************	anasnamannamannama	
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with							
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).							
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:							
				acaes .			
The address associated with Customer Number:			4	26386			
OR Firm or							
Individual Name							
Address							
City	ity		State		Zip		
Country							
Telephone Email							
Assignee Name and Address:							
Sunshine Heart, Inc.							
12988 Valley View Road							
Eden Prairie, MN 55344							
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be							
filed in each application in which this form is used. The statement under 37 CFR 3,73(b) may be completed by one of							
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.							
SIGNATURE of Assignee of Record							
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee							
Signature Wand O				Date 3/19/12		*************	
Name	10	David Rosa			elephone 952 3	45 4201	
Title	Chief Executive Officer						
This collection	This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to title (and by the USPTO to process) an application. Confidentiality is governeed by 35 USE. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.